

## VTC Request Form

*Instructions: Complete part I of the Satellite Broadcast Request Form.*

### *Part I (Completed by Requester)*

*Date of Request:*

*POC at Connection:*

*Phone:*

*Fax:*

*Email:*

*VTC Subject:*

*Start Date:*

*End Date:*

*Start Time:*

*End Time:*

*VTC Source:*

*Dial In Number:*

*Picture Dial In Number:*

*Back-up Number:*

*USAFSAM POC:*

*Phone:*

*Fax:*

*Email:*

### *Part II (Completed by ADL Staff)*

*ADL Approval:*

☐ yes

☐ no

*ADL Staff Initials:*

*Room #:*

*Work Order #:*